## STATE OF NEW HAMPSHIRE

## 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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OCT 24 2017

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NEW HAMPSHIRE

Business Address: (Street) (Town/City) (State)  (603) 228.1498 ( ) e-mail james.demers (Telephone) (Fax)  III. This statement covers: (Choose one – file separate reports for each client, OR you may file a reportable expense transactions which are not attributable to any one client).  All reportable transactions occurring in the months prior to the reporting date relative to the follow (Full Name of Client as it appears on the Lobbyist Registration Form)  OR  All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm limited to any particular client.  IV. Date of Report April 26, 2017 July 26, 2017 activity from date of registration to 3/31/17 activity from 4/1/17 to 6/30/17  October 25, 2017 A January 31, 2018 January 31, 2018 Jactivity from 7/1/17 to 9/30/17 activity from 10/1/17 to 12/31/17  V. There have been no fees received and no reportable transactions made since the last If this box is checked, complete just this form and submit it to the Secretary of State's Office, State Hollowing Concord, NH 03301.  VI. Check if additional reports are attached:  If you have received fees or made expenditures, you must file Addendum A— Fees and Expenses	PARTMENT OF STATE
(Name of partnership, firm or corporation)  72 North Main St. Suite 301 Concord NH  Business Address: (Street) (Town/City) (State)  (603 228.1498 ( )	
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(Telephone)  (Full Name of Client as it appears to the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registration Form)  (Full Name of Client as it appears on the Lobbyist Registra	(Zip Code)
III. This statement covers: (Choose one – file separate reports for each client, OR you may file a reportable expense transactions which are not attributable to any one client).  All reportable transactions occurring in the months prior to the reporting date relative to the following firm the months prior to the reporting date relative to the following firm the months prior to the reporting date relative to the following firm the months prior to the reporting date relative to the following firm the months prior to the reporting date relative to the following firm the months prior to the reporting date relative to the following firm the months prior to the reporting date relative to the following firm the months prior to the reportable transaction form)  OR  All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm in mineral to any particular client.  IV. Date of Report  April 26, 2017  July 26, 2017  July 26, 2017  Activity from 4/1/17 to 6/30/17  October 25, 2017  Activity from 4/1/17 to 6/30/17  Activity from 10/1/17 to 12/31/17  V. There have been no fees received and no reportable transactions made since the last If this box is checked, complete just this form and submit it to the Secretary of State's Office, State Hollowing Concord, NH 03301.  VI. Check if additional reports are attached:  If you have received fees or made expenditures, you must file Addendum A— Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B— Report of	@demers-blaisdell.com
(Full Name of Client as it appears on the Lobbyist Registration Form)  OR  All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm light unrelated to any particular client.  IV. Date of Report April 26, 2017  Reports cover: activity from date of registration to 3/31/17 activity from 4/1/17 to 6/30/17  October 25, 2017  October 25, 2017  Activity from 7/1/17 to 9/30/17  V. There have been no fees received and no reportable transactions made since the last If this box is checked, complete just this form and submit it to the Secretary of State's Office, State Holloword, NH 03301.  VI. Check if additional reports are attached:  If you have received fees or made expenditures, you must file Addendum A— Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B— Report of	separate report for
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If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses  If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of	
[] If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of	
L	
If you, your firm, or your family has made political contributions, you must file Addendum C-F	olitical Contributions
Sworn Statement/Affirmation by Lobbyist  I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing and complete to the best of my knowledge and belief.  (Signature of lobbyist)  (Print Name of lobbyist)	-

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## STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

OCT 2 4 2017

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(RSA Chapter 15:6)

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) James Demers, Robert Blaisdell, Tom F	Prasol
II. Name of lobbyist's partnership, firm or corporation, if any:	
Demers, Blaisdell & Prasol, Inc	
(Name of partnership, firm or corporation)	1 / 2
III. Name of Client NH ATHLETIC TRAINERS ASSOC.	Date 10/13/17
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The gro reduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar ye	D) \$
c) Total of all fees received to date (Add lines a and b)	c) \$
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repetes. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	lient and if expenditures are made by hay be filed for the lobbyist(s)/firm. aggregate total of all expenses paid penses; (b) the aggregate total of all expenses is than \$10 that is given to the persond with a value of \$25.00 or less); and rting period of greater than \$25.00 for e of greater than \$25, purchase of a r than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$

c) Total of all itemized expenditures reported in detail in section VI.

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
(Signature of lobbyist)  Jenes M. Deness	10/13/17
(Signature of lobbyist)	(Date)
(Print Name of lobbyist)	